## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P. O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (871)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required), Blocks 1 through 5 should be completed where

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
33751	7590 62/23	/2010	uav			
Greatbatch Ltd. 10,000 Wehrle Drive Clarence, NY 14031				Certificate of Mailing or Transmission  I hereby certify that this Fee(c) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (371) 273-2885, on the date indicated below.		
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/551,295			Robert Allan Young		PRE-SOS-0139 4602	
TITLE OF INVENTION:	LOCKING BONE PLA	NTE				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	DE DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	05/24/2010
EXAMI	EXAMINER		CLASS-SUBCLASS	1		
LAWSON, MAT	THEW JAMES	3775	606-069000			
1. Change of correspondence address or indication of "Fee Address" (3 CFR 1.363).  Change of correspondence address (or Change of Correspondenc Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required.			2. For printing on the pattern front page, list (1) the names of up to 3 registered pattent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered strongs or agent) and the names of up to listed, no name will be printed. egister. If are name is listed, no name will be printed. egister.			
3. ASSIGNEE NAME AN	D RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or ty	ne)		
PLEASE NOTE: Unit recordation as set forth	ess an assignee is identi in 37 CFR 3.11. Comp	fied below, no assignee detion of this form is NC	data will appear on the p T a substitute for filing an	atent. If an assign assignment.	ee is identified below, the	document has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Swiss Orthone	dic Solutions S	Δ.	Rathausgasse 4,	CH-3280 Mor	at, Switzerland	
			rinted on the patent);	Individual 🖸 Co	orporation or other private p	group entity Government
4a. The following fee(s) a			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  \[ \begin{align*} \text{A check is enclosed.} \end{align*}			
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
Advance Order - #	of Copies		overpayment, to Depo	sit Account Number	ge the required fee(s), any r(enclose	an extra copy of this form).
5. Change in Entity State			ma .			
	SMALL ENTITY statu Publication Fee (if requested Status				LL ENTITY status. See 37 stered attorney or agent; or	CFR 1.27(g)(2). the assignee or other party in
Authorized Signature	Maho	cetise		Date	E-1 22 2	
Typed or printed name	Michael F. Sc	alise		Registration N	io. 34920	
			on is required to obtain or a 1.14. This collection is est depending upon the india			and by the USPTO to process ling gathering, preparing, and time you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22315-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.